

DISCLOSURE SUMMARY PAGE

File with:

Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

ETHICS AND
PM 7-15-10
2010 JUL 20 AM 8:46

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM**DR-2**

(Rev. 12/2009)

DISCLOSURE
REPORT**For Office Use Only**

Comm. #

Logged In

Scanned

Computer

Audited

18531

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Dennis W. Menefee
SIGNATURE OF PERSON FILING REPORT

712-276-3327

TELEPHONE

07/15/10

DATE SIGNED

I AM FILING A July 19, 2010

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☒ 1☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 1,180.07

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1,100.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 2,280.07

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1,965.66

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 314.41

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 917.19

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 825.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 1,000.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

| | |
|---|----------------------|
| SCHEDULE A (Rev. 07/03) | MONETARY RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|---------------------------------------|--|--|--|-----------------|-----------------------------|
| 05/12/10 | ID# CK# 5630 | Ron Krage PO Box 117 Sioux City, IA 51102 | | \$25 | <input type="checkbox"/> |
| 05/12/10 | ID# CK# 755 | Milton Glazer PO Box 3800 Sioux City, IA 51102 | | 25 | <input type="checkbox"/> |
| 05/12/10 | ID# CK# 8512 | Louis J. Klusak 2525 Nebraska St. #301 Sioux City, IA 51104 | | 20 | <input type="checkbox"/> |
| 05/13/10 | ID# CK# 6917 | Stanley Swanson 215 Kings Hwy Sioux City, IA 51104 | | 50 | <input type="checkbox"/> |
| 05/15/10 | ID# CK# Cash | Fred Stolen 1805 Cedar St Sioux City, IA 51106 | | 25 | <input type="checkbox"/> |
| 05/15/10 | ID# CK# 7069 | Donald L. Lawrenson 4000 Teton Trace #230 Sioux City, IA 51104 | | 25 | <input type="checkbox"/> |
| 05/19/10 | ID# CK# 5138 | Regina Roth 984 Quail Hollow Circle Dakota Dunes, SD 57049 | | 50 | <input type="checkbox"/> |
| 05/20/10 | ID# CK# 5479 | Mr. & Mrs. LeRoy J. Yanney 4850 Skyline Drive Sioux City, IA 51104 | | 10 | <input type="checkbox"/> |
| 05/25/10 | ID# CK# 5922 | Rober Knowler 4001 Old Lakeport Rd Sioux City, IA 51106 | | 300 | <input type="checkbox"/> |
| 05/25/10 | ID# CK# 10417 | Bruce Lewis 3119 Knollwood Court Sioux City, IA 51106 | | 50 | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ 580 | |
| TOTAL (if last page of this schedule) | | | | \$ | |

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

| | |
|---|----------------------|
| SCHEDULE A (Rev. 07/03) | MONETARY RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND- RAISER INCOME |
|---------------------------------------|---|---|--|--------------------|---------------------------------------|
| 05/25/10 | ID# CK# 9716 | Wayne Schumann 2096 Michigan Ave Anthon, IA 51004 | | \$50 | <input type="checkbox"/> |
| 05/25/10 | ID# CK# Cash | Bill Metz 3251 Floyd Blvd Sioux City, IA 51108 | | 100 | <input type="checkbox"/> |
| 05/25/10 | ID# CK# 3350 | George Thorpe Clark 37th St Place #19 Sioux City, IA 51104 | | 25 | <input type="checkbox"/> |
| 05/28/10 | ID# CK# 5698 | Rick Schneider 10 Heritage Pl Sioux City, IA 51106 | | 25 | <input type="checkbox"/> |
| 05/28/10 | ID# CK# 6146 | Rick & Wendy VanHatten 713 Granada Ln Vacaville, CA 95688 | | 50 | <input type="checkbox"/> |
| 06/02/10 | ID# CK# Cash | Jim & Pam Paul 2115 South Glass Sioux City, IA 51106 | | 120 | <input type="checkbox"/> |
| 06/08/10 | ID# CK# 3231 | M.P. Trust 1866 Hwy 141 PO Box 44 Sloan, IA 51055 | | 50 | <input type="checkbox"/> |
| 06/08/10 | ID# CK# 4414 | Dennis & Lavonne Menefee 1924 South Lemon St Sioux City, IA 51106 | | 100 | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ 520 | |
| TOTAL (if last page of this schedule) | | | | \$ 1100 | |

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| | |
|---|--------------------------|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|---------------------------------------|---|--|-----------------------------------|--------------------|
| 05/14/10 | ID# CK# 1022 | T'S 2 PLEEZE 1008 West 7th St Sioux city, IA 51103 | Shirts | \$ 344.54 |
| 05/15/10 | ID# CK# 1023 | Sloan Cafe | Coffee, doughnuts | 45 |
| 05/26/10 | ID# CK# 1024 | Danbury Review | Newspaper | 183.75 |
| 05/26/10 | ID# CK# 1025 | Moville Record | Newspaper | 200 |
| 05/26/10 | ID# CK# 1026 | Sergeant Bluff, Advocate | Newspaper | 207 |
| 05/26/10 | ID# CK# 1027 | Sioux Valley News | Newspaper | 200 |
| 05/27/10 | ID# CK# 1028 | Ryan Publishing | Newspaper | 174 |
| 05/29/10 | ID# CK# 1029 | 4-Way Stop Shop | Bakery Items | 17.47 |
| SUB-TOTAL | | | | \$ 1371.76 |
| TOTAL (if last page of this schedule) | | | | \$ |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| | |
|---|--------------------------|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|---------------------------------------|---|--|--|--------------------|
| 06/01/10 | ID# CK# 1030 | USPS | Stamps | \$ 430.36 |
| 06/01/10 | ID# CK# 1031 | Impressions 4305 Stone Ave Sioux City, IA | Postcards | 133.54 |
| 06/07/10 | ID# CK# | Refund from the Merville Record | Ad printed in black and white not in color as requested | (\$20.00) |
| 07/02/10 | ID# CK# 1032 | Rivercade | Parade entry fee | 50 |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 593.90 |
| TOTAL (if last page of this schedule) | | | | \$ 1965.66 |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

SCHEDULE

D

(Rev. 08/98)

INCURRED
INDEBTEDNESS
☐ CHECK THIS BOX
IF AMENDING
FORM

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

| DATE INCURRED (MM/DD/YR) | NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED | BALANCE OWED AT CLOSE OF REPORTING PERIOD* |
|---|---|--|--|
| 03/22/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | 2,500 Red, White, Trevi Pens | \$ 568.24 |
| 04/03/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Candy for Parade | 39.89 |
| 04/22/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Laser Labels and Envelopes | 60.17 |
| 04/22/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Supplies for Yard Signs | 11.34 |
| 04/26/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Copy Paper | 34.14 |
| 04/26/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Sign at Smithland, IA | 17.87 |
| 05/02/10 | Michael Clayton 3600 Transit Ave Sioux city, IA 51106 | Magnets for Signs | 19.20 |
| SUB-TOTAL | | | \$ 750.85 |
| TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD | | | \$ |

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 2
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

"Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

SCHEDULE

D

(Rev. 08/98)

INCURRED
INDEBTEDNESS☐ CHECK THIS BOX
IF AMENDING
FORM**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

| DATE INCURRED (MM/DD/YR) | NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED | BALANCE OWED AT CLOSE OF REPORTING PERIOD* |
|---|--|--|---|
| 05/05/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Monogram | \$ 13.90 |
| 05/06/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Materials for Merville, IA sign | 47.60 |
| 05/06/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | Wood treatment for Merville, IA sign | 14.96 |
| 05/28/10 | Michael Clayton 3600 Transit Ave Sioux City, IA 51106 | T-Shirts from T'S 2 Pleeze | 89.88 |
| | | | |
| | | | |
| | | | |
| SUB-TOTAL | | | \$ 166.34 |
| TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD | | | \$ 917.19 |

*If actual figure is unknown, show "estimated" beside the figure.

Page 2 of 2
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

Reset Form

| | |
|---|----------------------------------|
| SCHEDULE E (Rev. 06/97) | IN-KIND CONTRIBUTIONS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

| DATE RECEIVED (MM/DD/YY) | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE * (if applicable) | DESCRIPTION OF IN KIND CONTRIBUTION | ESTIMATED FAIR MARKET VALUE | ✓ IF FOR FUND-RAISER CONTRIBUTION |
|--------------------------------|---|---|---|-----------------------------------|---|
| 4/22/10 | Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106 | | Envelopes, stationary | \$ 75.00 | <input type="checkbox"/> |
| 5/29/10 | Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106 | | Printing 300 posters at \$.50 ea | 150.00 | <input type="checkbox"/> |
| 5/29/10 | Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106 | | Use of fire truck for Morningside Davs Parade | 150.00 | <input type="checkbox"/> |
| 5/29/10 | Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106 | | Use of convertible for Anthon parade | 150.00 | <input type="checkbox"/> |
| 5/29/10 | Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106 | | 6 hrs use of Calliope and Circus Truck | 300.00 | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |

SUB-TOTAL

\$

TOTAL (if last
page of this
schedule)

\$

825.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

RESET

SCHEDULE

F

(Rev. 02/08)

**LOANS
RECEIVED
& REPAYED**☐ **CHECK THIS BOX IF
AMENDING FORM****COMMITTEE NAME**(Must be same as on Statement of Organization)

MIKE CLAYTON FOR TREASURER

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$** _____**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

| DATE RECEIVED (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE (If Applicable*) | AMOUNT OF LOAN |
|--------------------------|---|--|----------------|
| 04/25/10 | Michael Clayton 3600 Transit Ave Sioux City, Iowa 51106 | He is the candidate | \$ 1000 |
| | | | |
| | | | |
| | | | |

TOTAL (PART I) \$ 1000**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

| DATE PAID (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE* (If Applicable) | AMOUNT REPAYED |
|----------------------|---|--|----------------|
| | | | \$ |
| | | | |
| | | | |
| | | | |

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E - TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1000

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.